Statement of	Organization -	Party	Committee

Amendment	
Yes	□ No

Use this form to create a new or update an existing party committee. This form must be accompanied by form CRO-3500.

1. Committee Infor	mation					
a. Full Name					c. ID Number	
h Mailing Addrass (inc	lude City, State and Zip Code)				d. Date Organized	
b. Maining Address (inc	idue City, State and Zip Code)				u. Date Organizeu	
					e. Phone Number	
2. Party Information	an .					
a. Type	JII		b. Party Name			
National			ov I all of I tallie			
State						
Subordinate						
3. Treasurer Inform	mation		4. Custodian of Bo	oks Informa	ntion	
a. Full Name			a. Full Name			
b. Mailing Address (inc	lude City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)			
c. Phone Number	d. Email Address		c. Phone Number	d. Email Addr	ress	
5. Assistant Treasu	rer Information \square A	Add	6. Account Information (incl. CRO-3500)			
a. Full Name	☐ R	Remove	a. Financial Institution Full Name Remove			
h Mailing Address (inc	lude City, State, and Zip Code)		b. Purpose			
b. Maning Address (me	nuc City, State, and Zip Couc)		b. I di posc			
c. Phone Number	d. Email Address		c. Account Code	d. Type		
CERTIFICATION						
•	ommittee or Fund is in compliant					
	NC General Statutes and that r		e commingled with p	prohibited or	other non-disclosed funds. I	
further certify that	this report is complete, true and	d correct.				
	1M 00'	C.			- D (
Printe	d Name of Signer	Sign	nature of Appointed Trea	surer	Date	



Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Confidential

Certification of Financial Account Information

This Certification is used to report confidential bank account information for all financial accounts established by the committee and must accompany the Statement of Organization Form

Committee Name	e:			
Treasurer Name:				
Treasurer Addres	ss:			
(include city, state,	& zip)			
Treasurer Phone:	:			
he above named Commoney market or saving the information provided court of competent jurto provide account infected, confidentiality of the treasurer shall market and competent infected.	mittee. These account n ngs accounts, or any other ded on this form is cons would only be used for isdiction. It will be necessification on required dis- of the account number is	s true and accurate. I am provious true and accurate. I am provious aumbers include all bank account refinancial account used for an idered confidential and is not so the purposes of an audit or it essary to assign each account resclosure reports. If an account respectively account respectively.	nts utilized, credit card ac y purpose by the Committ subject to public disclosur nvestigation or as require number a "account code" it t number is used as the "a d.	counts, tee. The ed by a n order account
				ts used
exclusively by the policity of account		Il not commingle those funds v		Account Code
	itical committee and shall	ll not commingle those funds v	vith any other moneys.	Account
	itical committee and shall	ll not commingle those funds v	vith any other moneys.	Account
Type of account	itical committee and shale Financial Institution	ll not commingle those funds v	vith any other moneys. Account Number	Account
Type of account By signing this state	itical committee and shale Financial Institution	Address of the State Board of Election	vith any other moneys. Account Number	Account Code
By signing this state provided. Date Signed In lieu of providing	Financial Institution Financial Institution ement, I authorize agents	Address of the State Board of Election Sig ertify that this committee will 1	Account Number Sto inspect all accounts Canadidate or Treasurer	Account Code
By signing this state provided. Date Signed In lieu of providing	Financial Institution Ement, I authorize agents account information, I co	Address of the State Board of Election Sig ertify that this committee will a sy choose this option.)	Account Number Sto inspect all accounts Canadidate or Treasurer	Account



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Additional account numbers:

Type of Account	Financial Institution	Address	Account Number	Account Code
	•	•	•	

Date Signed

Signature of Candidate or Treasurer

GARY O. BARTLETT Executive Director

Mailing Address: P.O. BOX 27255 RALEIGH, NC 27611-7255 (919) 733-7173 FAX (919) 715-8047

TO: Political Party Committees
Political Action Committees

Referendum Committees

FR: Campaign Finance Office

RE: Organizational Reports

The first campaign finance report a committee files is called the Organizational Report. This report must be postmarked within 10 days of either:

- (a) The date of the committee's first contribution, or
- (b) The date of the committee's first expense, or
- (c) The date of the committee's first loan, or
- (d) The date of filing a Notice of Candidacy, or
- (e) The date of filing a Statement of Organization, WHICHEVER OCCURS FIRST.

Campaign finance reports include a series of forms, all of which are available on the State Board of Elections website. http://www.sboe.state.nc.us

All reports contain AT LEAST a Disclosure Report Cover (CRO-1000) and a Detailed Summary (CRO-1100). These forms are attached. If the committee has not raised or spent any funds, then the summary page will contain cash-on-hand beginning and ending balances of \$0.

If the committee received contributions or made expenditures, additional pages need to be included in the report. If a loan is made to open a bank account, a Loan Proceeds Form (CRO-1410) and a Loan Proceeds Statement (CRO-6100) would be needed or if a committee makes expenditures a Disbursements Form (CRO-1310) will be an additional page in the report.

Political parties, state and federal PAC's and state referendum committees file reports at the State Board of Elections.

Local PAC's and local referendum committees file reports at their County Board of Elections.

State and County campaign finance staff can advise new committees on the proper forms to include in a report.

LOCATION: 506 NORTH HARRINGTON STREET • RALEIGH, NORTH CAROLINA 27603

1. Committee Informa	tion					
a. Full Name						c. ID Number
b. Mailing Address (include	City, State and Zip Co	de)				d. Date Filed
						e. Phone Number
2. Report Year 3. Peri	od Start Date (mm/d	ld/vv) 4. Period I	End Date (m	m/dd/vv)	5. Treasur	er Full Name
6. Type of Committee ((Check One)	9. Type of Rep	ort (check	only one	type of rep	ort from one category)
Candidate Campaign	Party	Municipal		te/County	type of rep	Referendum
PAC	Referendum	Organizationa	al 🔲	Organizat	ional	Organizational
Independent Expenditure	Joint Fundraiser	Thirty-five da	بر. 	Quarterly		Pre-referendum
Legal Expense Fund		Pre-primary		First		Final
		Pre-election		Seco		Supplemental Final
• •	applicable, check one)	Pre-runoff	牌	Thir		Annual
Booster Fund		Semi-annual	ᄖ	Four		Special
Building Fund		Mid Yea		Semi-ann	uaı Year	10 Charles Danaut N
Other:		Year En	° ⊩		End	10. Special Report N
8. Number of Fundrais	care this Report	Special	H	Final	Liid	
o. Number of Fundrals	sers tills Report	Special	片			
11 A 4 T - C 4º			L	Special	4	
11. Account Information Full			11. Account			
u. i munciui institution i un	Tunic		ur i munciur	111311111111111	I dii i tuiic	
b. Purpose	c. Account (ode .	b. Purpose			c. Account Code
or i di pose	C. recount	5040	b. I di posc			C. recount cour
	d. Period Be	egin Balance				d. Period Begin Balance
	\$					\$
	\$	<u> </u>	1			\$

	Printed Name of Signer	Signature of Appointed Treasurer	Date
O	R OFFICE USE ONLY		
	Date Received:	Employee:	<u>Delivery Method</u> ☐ Normal Mail
	Date Postmarked:	Employee:	☐ Registered Mail☐ Hand Delivered
	Date Scanned:	Employee:	☐ Electronically Filed
	Date Data Entered:	Employee:	Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Amendment

Yes No

Use this form to summarize all disclosure reporting forms and 1. Committee Full Name (and Fund if applicable)			ID Number	
·		•		
		Total this		Total this
Start of Election Cycle: January 1,	_	Reporting Perio	d	Election Cycle
4) Cash on Hand at Start		\$		\$
<u>RECEIPTS</u>				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	9	\$
6) Contributions from Individuals	(CRO-1210)	\$	3	\$
7) Contributions from Political Party Committees	(CRO-1220)	\$		\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	9	\$
9) Loan Proceeds	(CRO-1410)	\$		\$
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$		\$
11) Other Receipt Sources				
11a) Interest on Bank Accounts	(CRO-1250)	\$		\$
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$		\$
11c) Outside Sources of Income	(CRO-1250)	\$		\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$		\$
11e) Exempt Purchase Price Sales	(CRO-1265)	\$		\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c	,11d and 11e)	\$		\$
<u>EXPENDITURES</u>				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$	9	\$
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$		\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$		\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$		\$
15) Loan Repayments	(CRO-1420)	\$		\$
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$		\$
17) In-Kind Contributions	(CRO-1510)	\$		\$
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$		\$
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$	9	\$
ADDITIONAL INFORMATION				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$		
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$		
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$		
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$		
24) Account Transfers Within the Committee	(CRO-1720)	\$		
25) Administrative Support	(CRO-1710)	\$		\$
26) Forgiven Loans	(CRO-1440)	\$		\$
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	9	\$
28) Contributions to be Refunded	(CRO-1215)	\$	9	\$